PCT

REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

Applicant's or agent's file reference *(if desired) (12 characters maximum)*	PU020353

Box No. I   TITLE OF INVENTION
METHOD AND APPARATUS FOR EXTRACTING THE PHASE OF AN ORTHOGONAL FREQUENCY DIVISION MULTIPLEXING (OFDM) SIGNAL SAMPLE

Box No. II   APPLICANT   ☐ This person is also inventor

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)* THOMSON LICENSING S.A. 46, Quai A. Le Gallo 92648 Boulogne Cedex France	Telephone No. +33141865000
	Facsimile No. +33141865633
	Teleprinter No.
	Applicant's registration No. with the Office

State *(that is, country)* of nationality: FR	State *(that is, country)* of residence: FR

This person is applicant for the purposes of: ☐ all designated States ☒ all designated States except the United States of America ☐ the United States of America only ☐ the States indicated in the Supplemental Box

Box No. III   FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)* BELOTSERKOVSKY, Maxim Borisovich 9108 Bryant Lane 3A Indianapolis, Indiana 46250 United States of America	This person is: ☐ applicant only ☒ applicant and inventor ☐ inventor only *(If this check-box is marked, do not fill in below.)*
	Applicant's registration No. with the Office

State *(that is, country)* of nationality: US	State *(that is, country)* of residence: US

This person is applicant for the purposes of: ☐ all designated States ☐ all designated States except the United States of America ☒ the United States of America only ☐ the States indicated in the Supplemental Box

☒ Further applicants and/or (further) inventors are indicated on a continuation sheet.

Box No. IV   AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE

The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: ☒ agent   ☐ common representative

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)* TRIPOLI, Joseph S.; LAKS, Joseph J.; KURDYLA, Ronald H.; DUFFY, Vincent E.; NAVON, Jeffrey M. THOMSON multimedia Licensing Inc. P.O. Box 5312 Princeton, New Jersey 08540 US	Telephone No. 1-317-587-4019
	Facsimile No. 1-609-734-6888
	Teleprinter No. 219966
	Agent's registration No. with the Office

☐ Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

Form PCT/RO/101 (first sheet) (March 2001, reprint January 2002)
LegalStar 2002, Form PCTREQ

See Notes to the request form

Continuation of Box No. III FURTHER APPLICANTS AND/OR (FURTHER) INVENTOR(S)

If none of the following sub-boxes is used, this sheet should not to be included in the request.

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)*	This person is:
DEMOULIN, Vincent 2, rue de Clayes 35137 Pleumeleuc France	☐ applicant only ☒ applicant and inventor ☐ inventor only *(If this check-box is marked, do not fill in below.)*
	Applicant's registration No. with the Office

State *(that is, country)* of nationality: FR	State *(that is, country)* of residence: FR

This person is applicant for the purposes of:	☐ all designated States	☐ all designated States except the United States of America	☒ the United States of America only	☐ the States indicated in the Supplemental Box

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)*	This person is:
LITWIN, Jr., Louis Robert 34-14 Quail Ridge Drive Plainsboro, New Jersey 08536 United States of America	☐ applicant only ☒ applicant and inventor ☐ inventor only *(If this check-box is marked, do not fill in below.)*
	Applicant's registration No. with the Office

State *(that is, country)* of nationality: US	State *(that is, country)* of residence: US

This person is applicant for the purposes of:	☐ all designated States	☐ all designated States except the United States of America	☒ the United States of America only	☐ the States indicated in the Supplemental Box

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)*	This person is:
	☐ applicant only ☐ applicant and inventor ☐ inventor only *(If this check-box is marked, do not fill in below.)*
	Applicant's registration No. with the Office

State *(that is, country)* of nationality:	State *(that is, country)* of residence:

This person is applicant for the purposes of:	☐ all designated States	☐ all designated States except the United States of America	☐ the United States of America only	☐ the States indicated in the Supplemental Box

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)*	This person is:
	☐ applicant only ☐ applicant and inventor ☐ inventor only *(If this check-box is marked, do not fill in below.)*
	Applicant's registration No. with the Office

State *(that is, country)* of nationality:	State *(that is, country)* of residence:

This person is applicant for the purposes of:	☐ all designated States	☐ all designated States except the United States of America	☐ the United States of America only	☐ the States indicated in the Supplemental Box

☐ Further applicants and/or (further) inventors are indicated on another continuation sheet.

Box No.V   DESIGNATION OF STATES   *Mark the applicable check-boxes below; at least one must be marked.*

The following designations are hereby made under Rule 4.9(a):

Regional Patent

☒ **AP   ARIPO Patent: GH** Ghana, **GM** Gambia, **KE** Kenya, **LS** Lesotho, **MW** Malawi, **MZ** Mozambique, **SD** Sudan, **SL** Sierra Leone, **SZ** Swaziland, **TZ** United Republic of Tanzania, **UG** Uganda, **ZM** Zambia, **ZW** Zimbabwe, and any other State which is a Contracting State of the Harare Protocol and of the PCT *(if other kind of protection or treatment desired, specify on dotted line)* ....

☒ **EA   Eurasian Patent: AM** Armenia, **AZ** Azerbaijan, **BY** Belarus, **KG** Kyrgyzstan, **KZ** Kazakhstan, **MD** Republic of Moldova, **RU** Russian Federation, **TJ** Tajikistan, **TM** Turkmenistan, and any other State which is a Contracting State of the Eurasian Patent Convention and of the PCT

☒ **EP   European Patent: AT** Austria, **BE** Belgium, **CH & LI** Switzerland and Liechtenstein, **CY** Cyprus, **DE** Germany, **DK** Denmark, **ES** Spain, **FI** Finland, **FR** France, **GB** United Kingdom, **GR** Greece, **IE** Ireland, **IT** Italy, **LU** Luxembourg, **MC** Monaco, **NL** Netherlands, **PT** Portugal, **SE** Sweden, **TR** Turkey, and any other State which is a Contracting State of the European Patent Convention and of the PCT

☒ **OA   OAPI Patent: BF** Burkina Faso, **BJ** Benin, **CF** Central African Republic, **CG** Congo, **CI** Cote d'Ivoire, **CM** Cameroon, **GA** Gabon, **GN** Guinea, **GQ** Equatorial Guinea, **GW** Guinea-Bissau, **ML** Mali, **MR** Mauritania, **NE** Niger, **SN** Senegal, **TD** Chad, **TG** Togo, and any other State which is a member State of OAPI and a Contracting State of the PCT *(if other kind of protection or treatment desired, specify on dotted line)* ....

National Patent *(if other kind of protection or treatment desired, specify on dotted line):*

☒ AE	United Arab Emirates	☒ GM	Gambia	☒ NZ	New Zealand		
☒ AG	Antigua and Barbuda	☒ HR	Croatia	☒ OM	Oman		
☒ AL	Albania	☒ HU	Hungary	☒ PH	Philippines		
☒ AM	Armenia	☒ ID	Indonesia	☒ PL	Poland		
☒ AT	Austria	☒ IL	Israel	☒ PT	Portugal		
☒ AU	Australia	☒ IN	India	☒ RO	Romania		
☒ AZ	Azerbaijan	☒ IS	Iceland	☒ RU	Russian Federation		
☒ BA	Bosnia and Herzegovina	☒ JP	Japan				
☒ BB	Barbados	☒ KE	Kenya	☒ SD	Sudan		
☒ BG	Bulgaria	☒ KG	Kyrgyzsta	☒ SE	Sweden		
☒ BR	Brazil	☒ KP	Democratic People's Republic	☒ SG	Singapore		
☒ BY	Belarus		of Korea	☒ SI	Slovenia		
☒ BZ	Belize	☒ KR	Republic of Korea	☒ SK	Slovakia		
☒ CA	Canada	☒ KZ	Kazakhstan	☒ SL	Sierra Leone		
☒ CH & LI	Switzerland and Liechtenstein	☒ LC	Saint Lucia	☒ TJ	Tajikistan		
☒ CN	China	☒ LK	Sri Lanka	☒ TM	Turkmenistan		
☒ CO	Colombia	☒ LR	Liberia	☒ TN	Tunisia		
☒ CR	Costa Rica	☒ LS	Lesotho	☒ TR	Turkey		
☒ CU	Cuba	☒ LT	Lithuania	☒ TT	Trinidad and Tobago		
☒ CZ	Czech Republic	☒ LU	Luxembourg				
☒ DE	Germany	☒ LV	Latvia	☒ TZ	United Republic of Tanzania		
☒ DK	Denmark	☒ MA	Morocco	☒ UA	Ukraine		
☒ DM	Dominica	☒ MD	Republic of Moldova	☒ UG	Uganda		
☒ DZ	Algeria			☒ US	United States of America		
☒ EC	Ecuador	☒ MG	Madagascar				
☒ EE	Estonia	☒ MK	The former Yugoslav Republic of	☒ UZ	Uzbekistan		
☒ ES	Spain		Macedonia	☒ VN	Viet Nam		
☒ FI	Finland	☒ MN	Mongolia	☒ YU	Yugoslavia		
☒ GB	United Kingdom	☒ MW	Malawi	☒ ZA	South Africa		
☒ GD	Grenada	☒ MX	Mexico	☒ ZM	Zambia		
☒ GE	Georgia	☒ MZ	Mozambique	☒ ZW	Zimbabwe		
☒ GH	Ghana	☒ NO	Norway				

Check-boxes below reserved for designating States which have become party to the PCT after issuance of this sheet:

☐ ....   ☐ ....   ☐ ....

☐ ....   ☐ ....   ☐ ....

Precautionary Designation Statement: In addition to the designations made above, the applicant also makes under Rule 4.9(b) all other designations which would be permitted under the PCT except any designation(s) indicated in the Supplemental Box as being excluded from the scope of this statement. The applicant declares that those additional designations are subject to confirmation and that any designation which is not confirmed before the expiration of 15 months from the priority date is to be regarded as withdrawn by the applicant at the expiration of that time limit. *(Confirmation (including fees) must reach the receiving Office within the 15-month time limit.)*

Box No. VI   PRIORITY CLAIM

The priority of the following earlier application(s) is hereby claimed:

Filing date of earlier application *(day/month/year)*	Number of earlier application	Where earlier application is:		
		national application: country	regional application:* regional Office	international application: receiving Office
item (1)				
item (2)				
item (3)				
·item (4)				
item (5)				

☐   Further priority claims are indicated in the Supplemental Box.

The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) *(only if the earlier application was filed with the Office which for the purposes of this international application is the receiving Office)* identified above as:

☐ . all items   ☐ item (1)   ☐ item (2)   ☐ item (3)   ☐ item (4)   ☐ item (5)   ☐ other, see Supplemental Box

* *Where the earlier application is an ARIPO application, indicate at least one country party to the Paris Convention for the Protection of Industrial Property or one Member of the World Trade Organization for which that earlier application was filed (Rule 4.10(b)(ii)):* ....

....

Box No. VII   INTERNATIONAL SEARCHING AUTHORITY

Choice of International Searching Authority (ISA) *(if two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used):*

ISA/ us...

Request to use results of earlier search; reference to that search *(if an earlier search has been carried out by or requested from the International Searching Authority):*

Date *(day/month/year)*	Number	Country *(or regional Office)*

Box No. VIII   DECLARATIONS

The following **declarations** are contained in Boxes Nos. VIII (i) to (v) *(mark the applicable check-boxes below and indicate in the right column the number of each type of declaration):*   Number of declarations

☐ Box No. VIII **(i)**   Declaration as to the identity of the inventor   :

☐ Box No. VIII **(ii)**   Declaration as to the applicant's entitlement, **as** at the international filing date, to apply for and be granted a patent   :

☐ Box No. VIII **(iii)**   Declaration as to the applicant's entitlement, **as** at the international filing date, to claim the priority of the earlier application   :

☐ Box No. VIII **(iv)**   Declaration of inventorship (only for the purposes of the designation of the   : United States of America)

☐ Box No. VIII **(v)**   Declaration as to non-prejudicial disclosures or exceptions to lack of novelty   :

Box No. IX   CHECK LIST; LANGUAGE OF FILING

This international application **contains**:		This international application is **accompanied by** the following item(s) *(mark the applicable check-boxes below and indicate in right column the number of each item):*	Number of items
(a) the following number of sheets in paper form:			
request (including declaration sheets)	: 5	1. ☒ fee calculation sheet	: 1
		2. ☐ original separate power of attorney	:
description (excluding sequence listing part)	: 10	3. ☒ original general power of attorney	: 4
claims	: 5	4. ☐ copy of general power of attorney; reference number, if any:	:
abstract	: 1		
drawings	: 5	5. ☐ statement explaining lack of signature	:
Sub-total number of sheets	: 26	6. ☐ priority document(s) identified in Box No. VI as item(s):	:
sequence listing part of description *(actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (b) below)*	: _____	7. ☐ translation of international application into *(language):*	:
		8. ☐ separate indications concerning deposited microorganism or other biological material	:
Total number of sheets	: 26	9. ☐ sequence listing in computer readable form (indicate also type and number of carriers (diskette, CD-ROM, CD-R or other))	
(b) sequence listing part of description filed in **computer readable form**		(i)☐ copy submitted for the purposes of international search under Rule 13*ter* only (and not as part of the international application)	:
(i)☐ only (under Section 801 (a)(i))		(ii)☐ *(only where check-box (b)(i) or (b)(ii) is marked in left column)* additional copies including, where applicable, the copy for the purposes of international search under Rule 13*ter*	:
(ii)☐ in addition to being filed in paper form (under Section 801 (a)(ii))			
Type and number of carriers (diskette, CD-ROM, CD-R or other) on which the sequence listing part is contained *(additional copies to be indicated under item 9(ii), in right column):*		(iii)☐ together with relevant statement as to the identity of the copy or copies with the sequence listing part mentioned in left column	:
....		10. ☒ other *(specify):* P.T.O.-1382.&.Return.Postcard.Receipt..	: 2

Figure of the drawings which should accompany the abstract: 5	Language of filing of the international application: ENGLISH

Box No. X   SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).

Ronald H. Kurdyla, Manager Patent Operations
THOMSON multimedia Licensing Inc.

(31.07.02)

For receiving Office use only

1. Date of actual receipt of the purported international application:	DT05 Rec'd PCT/PTO 3 1 JUL 2002	2. Drawings:
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:		☐ received:
4. Date of timely receipt of the required corrections under PCT Article 11(2):		☐ not received:
5. International Searching Authority (if two or more are competent): ISA/ U.S	6. ☐ Transmittal of search copy delayed until search fee is paid	

For International Bureau use only

Date of receipt of the record copy
by the International Bureau:

PCT

POWER OF ATTORNEY

(for an international application filed under the Patent Cooperation Treaty)

(PCT Rule 90.4)

The undersigned applicant(s)*(Names should be indicated as they appear in the request)*:

> BELOTSERKOVSKY, Maxim Borisovich
> DEMOULIN, Vincent
> LITWIN, Jr., Louis Robert

hereby appoints (appoint) the following person as: _X_ agent __ common representative

Name and address
(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

TRIPOLI, Joseph S.
LAKS, Joseph J.
KURDYLA, Ronald H.
DUFFY, Vincent E.
NAVON, Jeffrey M.

THOMSON multimedia Licensing Inc.
P. O. Box 5312
Princeton, New Jersey 08540
United States of America

to represent the undersigned before _X_ all the competent International Authorities
__ the International Searching Authority only
__ the International Preliminary Examining Authority only

in connection with the international application identified below:

Title of the invention: METHOD AND APPARATUS FOR EXTRACTING THE PHASE OF AN ORTHOGONAL FREQUENCY DIVISION MULTIPLEXING (OFDM) SIGNAL SAMPLE

Applicant's or agent's file reference: PU020353
International application number (if already available):

filed with the following Office UNITED STATES PATENT & TRADEMARK OFFICE as receiving Office and to make or receive payments on behalf of the undersigned.

Signature of the applicant(s) *(where there are several applicants, each of them must sign; next to each signature, indicate the name of the person signing and the capacity in which the person signs, if such capacity is not obvious from reading the request or this power):*

_____   July 29 _____2002
MAXIM BORISOVICH BELOTSERKOVSKY

_____   _____2002
VINCENT DEMOULIN

_____   10-30 _____2002
LOUIS ROBERT LITWIN, JR.

Form PCT/Model of power of attorney (for a given international application)

POWER OF ATTORNEY
THOMSON LICENSING S.A.

We,

THOMSON LICENSING S.A.
46, quai Alphonse Le Gallo
92648 Boulogne Cedex - France

do hereby grant

Joseph S. Tripoli
Senior Vice President
THOMSON multimedia Licensing Incorporated
Two Independence Way
Princeton, New Jersey 08540

a revocable, non-exclusive and delegable power of attorney to act for us (including the signing of requisite documents) in proceedings concerning patents and applications for patents, including international and other multi-country patents and applications for patents, in our name in the Patent Offices in all countries worldwide from January 1, 1999.

Dated this _____6th_____ day of _____APRIL_____, in the year 1999.

Signed :

Didier HUCK
Chairman of the Board of Directors

PCT

POWER OF ATTORNEY
(for an international application filed under the Patent Cooperation Treaty)
(PCT Rule 90.4)

The undersigned applicant(s)*(Names should be indicated as they appear in the request)*:

BELOTSERKOVSKY, Maxim Borisovich
DEMOULIN, Vincent
LITWIN, Jr., Louis Robert

hereby appoints (appoint) the following person as: <u>X</u> agent   ___ common representative

Name and address
(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

TRIPOLI, Joseph S.
LAKS, Joseph J.
KURDYLA, Ronald H.
DUFFY, Vincent E.
NAVON, Jeffrey M.

THOMSON multimedia Licensing Inc.
P. O. Box 5312
Princeton, New Jersey 08540
United States of America

to represent the undersigned before   <u>X</u> all the competent International Authorities
     ___ the International Searching Authority only
     ___ the International Preliminary Examining Authority only

in connection with the international application identified below:

Title of the invention: **METHOD AND APPARATUS FOR EXTRACTING THE PHASE OF AN ORTHOGONAL FREQUENCY DIVISION MULTIPLEXING (OFDM) SIGNAL SAMPLE**

Applicant's or agent's file reference: PU020353
International application number (if already available):

filed with the following Office <u>UNITED STATES PATENT & TRADEMARK OFFICE</u> as receiving Office and to make or receive payments on behalf of the undersigned.

Signature of the applicant(s)   *(where there are several applicants, each of them must sign; next to each signature, indicate the name of the person signing and the capacity in which the   person signs, if such capacity is not obvious from reading the request or this power):*

_____   _____ 2002
MAXIM BORISOVICH BELOTSERKOVSKY

✕ _____   ✕ _07 / 31 /_ 2002
VINCENT DEMOULIN

_____   _____ 2002
LOUIS ROBERT LITWIN, JR.

Form PCT/Model of power of attorney (for a given international application)

POWER OF ATTORNEY
THOMSON LICENSING S.A.

We,

THOMSON LICENSING S.A.
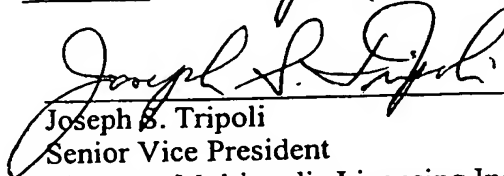46, Quai A. Le Gallo
92648 Boulogne Cedex
France

do hereby grant

Harvey D. Fried
Dennis H. Irlbeck
Joseph J. Laks
Irwin M. Krittman
Ronald H. Kurdyla
Robert D. Shedd
Vice Presidents and Managers
Thomson Multimedia Licensing Inc.
Two Independence Way
Princeton, New Jersey 08540

a revocable, non-exclusive and delegable power of attorney to act for us (including the signing of requisite documents) in proceedings concerning patents and applications for patents, including international and other multi-country patents and applications for patents, in our name in the Patent Offices in all countries worldwide from January 1, 1999.

DATED this 3ʳᵈ day of April , in the year 2002.

SIGNED

Joseph S. Tripoli
Senior Vice President
Thomson Multimedia Licensing Inc. and
Attorney In Fact for
THOMSON LICENSING S.A.

WITNESS: _Davida Tournarette_ _April 3, 2002_
DATE

POWER OF ATTORNEY
THOMSON LICENSING S.A.

THOMSON LICENSING S.A.
46, Quai A. Le Gallo
92648 Boulogne Cedex, France

does hereby grant

Vincent E. Duffy
Patent Counsel
Thomson Multimedia Licensing Inc.
Two Independence Way
Princeton, New Jersey 08543

a revocable, non-exclusive and delegable power of attorney to act for **us** (including the signing of requisite documents) in proceedings concerning patents **and** applications for patents, including international and other multi-country patents and applications for patents, in our name in the Patent Offices in all countries worldwide from January 1, 1999.

DATED this _____ day of _____ , 1999.

SIGNED

Irwin M. Krittman
Vice President
Thomson Multimedia Licensing Inc. and
Attorney In Fact for
THOMSON LICENSING S.A.

WITNESS

POWER OF ATTORNEY
THOMSON LICENSING S.A.

THOMSON LICENSING S.A.
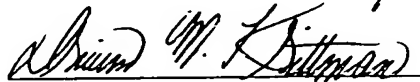*46, Quai A. Le Gallo*
92648 Boulogne Cedex, France

does hereby grant

Jeffrey M. Navon
Sr. Patent Counsel
Thomson Multimedia Licensing Inc.
Two Independence Way
Princeton, New Jersey 08543

a revocable, non-exclusive and delegable power of attorney to act for us (including the signing of requisite documents) in proceedings concerning patents and applications for patents, including international and other multi-country patents and applications for patents, in our name in the Patent Offices in all countries worldwide from December 1, 2001.

DATED this ___*18th*___ day of ___*January*___, 2002.

SIGNED ___*[signature]*___

Irwin M. Krittman
Vice President
Thomson Multimedia Licensing Inc. and
Attorney In Fact for
THOMSON LICENSING S.A.

WITNESS ___*[signature] Davida Fornarotto*___

This sheet is not part of and does not count as a sheet of the international application.

PCT

FEE CALCULATION SHEET
Annex to the Request

	For receiving Office use only
	PCT/US 02/24263
	International Application No.
	3 1 JUL 2002 (31.07.02)
	Date stamp of the receiving Office

Applicant's or agent's file reference	PU020353

Applicant
THOMSON LICENSING S.A.

CALCULATION OF PRESCRIBED FEES

I. TRANSMITTAL FEE .... | 240.00 | T | 240.00

2. SEARCH FEE .... | 700.00 | S | 700.00

International search to be carried out by _____ **ISA/US** _____

(If two or more International Searching Authorities are competent to carry out the international search, indicate the name of the Authority which is chosen to carry out the international search.)

3. INTERNATIONAL FEE

Basic Fee

Where item (b) of Box No. IX applies, enter **Sub-total number of sheets** } __26__
Where item (b) of Box No. IX does not apply, enter **Total number of sheets** }

b1	first 30 sheets		b1		407.00
b2	__0__ x __9.00__ =	0.00	b2	
	number of sheets fee per sheet			

b3	additional component (only if sequence listing part of description is filed in computer readable form under Section 801(a)(i), or both in that form and on paper, under Section 801(a)(ii)):
	400 x _____ =		b3
	fee per sheet

Add amounts entered at b1, b2 and b3 and enter total at B · · · | 0.00 | B

Designation Fees
The international application contains __116__ designations.
__5__ x __88.00__ = | 440.00 | D | 440.00
number of designation fees   amount of designation fee
payable *(maximum 5)*

Add amounts entered at B and D and enter total at I . . . . | 440.00 | I | 847.00

(Applicants from certain States are entitled to a reduction of 75% of the international fee. Where the applicant is (or all applicants are) so entitled, the total to be entered at I is 25% of the sum of the amounts entered at B and D.)

4. FEE FOR PRIORITY DOCUMENT *(if applicable)* . . . . | | P

5. TOTAL FEES PAYABLE . . . . | 1,380.00 | 1787.00
Add amounts entered at T, S, I and P, and enter total in the TOTAL box | TOTAL

☐ The designation fees are not paid at this time.

MODE OF PAYMENT

☒ authorization to charge	☐ postal money order	☐ cash	☐ coupons
☐ cheque	☐ bank draft	☐ revenue stamps	☐ other *(specify)*:

AUTHORIZATION TO CHARGE (OR CREDIT) DEPOSIT ACCOUNT
(This mode of payment may not be available at all receiving Offices)

Receiving Office: RO/ _____ **US**

☒ Authorization to charge the total fees indicated above.

Deposit Account No.: _____ **07-0832**

☒ *(This check-box may be marked only if the conditions for deposit accounts of the receiving Office so permit)* Authorization to charge any deficiency or credit any overpayment in the total fees indicated above.

Date: _____ **JULY 31, 2002**

Name: _____ **Ronald H. Kurdyla**

☒ Authorization to charge the fee for priority document.

Signature: _____

Form PCT/RO/101 (Annex) (January 2002)   *See Notes to the fee calculation she*
LegalStar 2002, Form PCTREQ